


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 10, 2004 8:00 am
Secretary of State

04-19-2004 90265 020 ****61.25

DOCUMENT # N03000006342					
1. Entity Name ON THE MOVE FOR GOD INTERNATIONAL, INC.					
Principal Place of Business 1800 SOUTH STREET SUITE 102 TITUSVILLE FL 32780			Mailing Address 1800 SOUTH STREET SUITE 102 TITUSVILLE FL 32780		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 45-0520152	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent A1A REGISTERED AGENT INC 92 SADBERRY RD. QUINCY FL 32351			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAMS, CYNTHIA		NAME	Gloria Williams	
STREET ADDRESS	1800 SOUTH STREET SUITE 102		STREET ADDRESS	1520 South Delon Ave	
CITY-ST-ZIP	TITUSVILLE FL 32780		CITY-ST-ZIP	Titusville Fla 32780	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	ASST / S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RILEY, REBECCA		NAME	Basheka Dawn Carter	
STREET ADDRESS	1800 SOUTH STREET SUITE 102		STREET ADDRESS	1539 Violet Ave Apt C	
CITY-ST-ZIP	TITUSVILLE FL 32780		CITY-ST-ZIP	Titusville Fla 32786	
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUBBARD, AMY		NAME		
STREET ADDRESS	1800 SOUTH STREET SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32780		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, LATRON		NAME		
STREET ADDRESS	1800 SOUTH STREET SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32780		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRKMAN, LATORIA		NAME		
STREET ADDRESS	1800 SOUTH STREET SUITE 102		STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32780		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOW, JOSEPH		NAME		
STREET ADDRESS	1539 VIOLET AVENUE APT. C		STREET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL 32796		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Cynthia Williams</i>			Date: _____		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Daytime Phone #		



MOORE CR2E037 (11/03)

Cell 321) 321-5895
 Home 321) 383-6013

40420785 [REDACTED]
Attachments NO3000006312

Delete as V
Rebecca Riley

Add as V
Glory Williams
1520 South DeLeon Ave
Titusville Fla 32780

Add as ASST S
Lasheta Carter
1539 Violet Ave Apt C
Titusville Fla 32796